



SOLICITATION AMENDMENT

Arizona Department of Veterans' Services

Purchasing Office

4141 N. 3rd Street

Phoenix, AZ 85012

(602) 263-1814

(602) 222-6687Fax

Solicitation No. **VSP07-100**

Amendment No: 1

Page 1

Solicitation Due Date: June 18, 2007 at 3:00 P.M. M.S.T.

Contact: Diana Martinez

Phone : (602) 263-1828

A signed copy of this amendment must be submitted with your Solicitation Response. This Solicitation is amended as follows:

1. The Solicitation Due Date has been extended to June 18 2007.
2. Correct Special Instructions to Offerors, page 7, Paragraph 3, Proposal Format, to read one (1) original and three (3) copies.
3. Revise numbering sequence in the Special Instructions to Offerors, Page 7, Paragraph 5, Section A, Method of Approach, to read A.1 through A.9
4. Add the following to Special Instructions to Offerors, Page 8, Paragraph 5, Section A, Method of Approach:
 - A.10 The Offeror shall provide a list of Subcontractor that will be utilized in the resultant Contract. This information shall be provided on Attachment E, page 3 of Solicitation Amendment #1.
 - A.11 The Offeror shall describe when reimbursement will be applicable to ADVS and percentage reimbursed. Percentage shall be provided on the Price Sheet, page 2 of Solicitation Amendment #1.
 - A.12 The Offeror shall describe when restocking charges will be applicable to ADVS and percentage charged. Percentage shall be provided on the Price Sheet, page 2 of Solicitation Amendment #1.
5. Add the following to the Scope of Work, Section A.12, Authorization:

ADVS shall provide the Contractor with a list of all authorized personnel in writing upon award. The list will include names, phone numbers and availability of all authorized personnel.
6. Revise the numbering sequence in the Scope of Work, Section A.15 to read A.14 and add the following information:

The IV Nurse will be required to familiar with the Needle less System. ADVS will provide all supplies for the IV Nurse; charges will include travel within Maricopa County and services only. The PIC Nurse will need to provide all supplies; charges will include travel within Maricopa County, supplies and services.
7. Replace Price Sheet, page 27 with Price Sheet, Page 2 of Solicitation Amendment #1.
8. Remove Medicare Part D from Attachment C, page 30.

All other provisions shall remain unchanged.

Vendor hereby acknowledges receipt and understanding of above amendment

Signature

Date

Name and Title:

Name of Company:

The above referenced Solicitation Amendment is hereby executed this _____ day of _____, 2007 in Phoenix, Arizona.

Signature

Name: Tammy Vogel

Title: Purchasing Officer



Price Sheet

Solicitation No: VSP07-100

Arizona Department of
Veterans' Services
4141 N. 3rd Street
Phoenix, AZ 85012
Phone: (602) 263-1814

The Contractor shall state below the single fixed discount off of Average Wholesale Price (AWP) to provide NAME BRAND pharmaceuticals as needed for the requirements stated in the Scope of Work.

_____ % off the AWP.

The Contractor shall state below the single fixed discount off of Average Wholesale Price (AWP) to provide GENERIC pharmaceuticals as needed for the requirements stated in the Scope of Work.

_____ % off the AWP.

The Contractor shall indicate the publication from which their AWP is obtained (i.e., Red Book):

The Contractor shall provide a fee for dispensing medications; the fee shall be a flat rate.

Dispensing Fee \$ _____

The Contractor shall provide percentage reimbursement for unused and/or unopened medications.

% _____

The Contractor shall provide a percentage for restocking unopened medications.

% _____

The Contractor shall provide a fee for an IV Nurse, the fee shall include charges for services and travel within Maricopa County. Supplies will be provided by ADVS.

\$ _____
Weekday Rate
(Mon – Fri 6:00a.m. to 6:00p.m.)

\$ _____
Weekend Rate
(Sat and Sun 6:00a.m. to 6:00p.m.)

\$ _____
After Hours Rate
(Mon – Sun 6:01p.m. to 5:59a.m.)

The Contractor shall provide a fee for a PICC Nurse, the fee shall include charges for all supplies, services and travel within Maricopa County.

\$ _____
Weekday Rate
(Mon – Fri 6:00a.m. to 6:00p.m.)

\$ _____
Weekend Rate
(Sat and Sun 6:00a.m. to 6:00p.m.)

\$ _____
After Hours Rate
(Mon – Sun 6:01p.m. to 5:59a.m.)

In the event the State exercises its option to renew the contract for additional periods pursuant to the applicable provisions in the Special Terms and Conditions section of this document, the Contractor should provide the maximum percentages of increase or minimum percentage of decrease for each renewal period in the spaces below. The Contractor is cautioned that the percentages shall be computed against the **ORIGINAL** contract price for each renewal period. If the following blanks are not completed, prices during renewal periods shall be the same as during the original. Further, the Contractor is advised that the State of Arizona does not automatically grant any increase at the time of renewing the contract and that if an increase is requested, documentation of need must be provided at the time of renewal.

1st Renewal Period _____ % Maximum Increase
2nd Renewal Period _____ % Maximum Increase
3rd Renewal Period _____ % Maximum Increase
4th Renewal Period _____ % Maximum Increase

Authorized Signature

Date



Attachment E: Sub-Contractor List

Solicitation No: VSP07-100

Arizona Department of
Veterans' Services
4141 N. 3rd Street
Phoenix, AZ 85012
Phone: (602) 263-1814

Company Name: _____

Address: _____

Contact Name: _____

Telephone Number: _____

Fax Number: _____

e-mail address: _____

Description of work performing: _____

Company Name: _____

Address: _____

Contact Name: _____

Telephone Number: _____

Fax Number: _____

e-mail address: _____

Description of work performing: _____

Company Name: _____

Address: _____

Contact Name: _____

Telephone Number: _____

Fax Number: _____

e-mail address: _____

Description of work performing: _____

NOTE: Additional copies of this form should be made to provide information of all subcontractors' utilized to perform services.